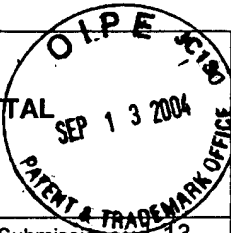


**TRANSMITTAL
FORM**



Application Number	10/692,627
Filing Date	October 24, 2003
First Named Inventor	James S. W. Lee
Art Unit	3712
Examiner Name	Faye Francis
Attorney Docket Number	200801-9014

Total Number of Pages in This Submission 13

ENCLOSURES (check all that apply)

- ☒ Amendment/Reply
 - ☒ Before Final
 - ☐ After Final
 - ☐ Affidavits/Declarations
- ☐ Information Disclosure Statement
 - ☐ PTO-1449 Form(s)
 - ☐ Cited References
- ☐ Certified Copy of Priority Document
- ☐ Response to Missing Parts/Incomplete Application
- ☒ Terminal Disclaimer
- ☐ Status Letter
- ☐ Other:

PETITION FOR EXTENSION OF TIME

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

- ☐ Applicant(s) claims small entity status under 37 CFR 1.27.
- ☒ Applicant(s) petitions for a one-month extension of time and pay the fee of \$110.00 (37 CFR 1.17(a)(1)-(5)).
- ☐ Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.

CLAIMS FEES

- ☒ No additional claim fee is required.

				Small Entity		Large Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate
Total	21	-	21	=0	x 9=	\$	x 18=
Independent	2	-	3	=0	x 43=	\$	x 86=
<input type="checkbox"/> First Presentation of Multiple Claim					+ 145=	\$	+ 290=

ENCLOSED FEES

<input type="checkbox"/> Additional Claim Fee	\$0.00
<input checked="" type="checkbox"/> Extension fee for one-month	\$110.00
<input type="checkbox"/> Information Disclosure Statement	\$0.00
<input type="checkbox"/> Surcharge for Missing Parts - Declaration	\$0.00
<input checked="" type="checkbox"/> Terminal Disclaimer	\$110.00
TOTAL FEES ENCLOSED	\$220.00

PAYMENT OF FEES

- ☒ A checks in the amount of \$110.00 and \$110.00 are enclosed.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965.
- ☐ The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$0.00.

SIGNATURE OF ATTORNEY

Barry W. Sufrin, Reg. No. 27,398
MICHAEL BEST & FRIEDRICH, LLP
401 North Michigan Avenue
Suite 1900
Chicago, Illinois 60611
Telephone: (312) 222-0800
Facsimile: (312) 222-0818

Signature
Date: 9/10/04

CERTIFICATE OF TRANSMISSION/MAILING

- I hereby certify that this correspondence is:
- ☐ being facsimile transmitted to the USPTO, facsimile number (703) 872-9306.
 - ☒ deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below

Typed or printed name	Elizabeth M. Campbell Tressler
Signature	Date: 9/10/04

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